

**IN THE CIRCUIT COURT OF THE TWENTY-SECOND JUDICIAL CIRCUIT
McHENRY COUNTY, ILLINOIS**

IN RE THE MARRIAGE OF

Petitioner

vs.

Case Number _____

Respondent

**DECLARATION UNDER
UNIFORM CHILD CUSTODY JURISDICTION ACT (UCCJA)
UNIFORM CHILD CUSTODY JURISDICTION ENFORCEMENT ACT
(UCCJEA)**

1. _____ Attorney's Name _____

2. Number of minor children subject to this proceeding: _____

Additional list attached. (Provide requested information for additional children on an attachment.)

Insert the information requested below. The residence information must be given for the last five years.

	Child One	Child Two	Child Three
Child's Name and Sex			
Date of Birth			
Place of Birth			
Child's Current Address and Length of Residence			
Name, Present Address and Relationship to Child of Person that lived at current address			
Child's Previous Address and Dates of Residence			
Name, Present Address and Relationship to Child of Person that lived at 1 st previous address			
Child's Previous Address and Dates of Residence			
Name, Present Address, and Relationship to Child of Person that lived at 2 nd previous address.			

3. Have you participated as a party, witness or in some other capacity in another litigation or custody proceeding, either in Illinois or elsewhere, concerning custody of a child subject to the proceeding?

Yes No If yes, please provide the following information:

- A. Name of each child: _____
 B. Capacity of declarant: Party Witness Other (specify) _____
 C. Court of Proceedings: (Specify Name, State, Location) _____

 D. Date of Final Order or Judgment _____

4. Do you have information about a custody proceeding pending in an Illinois court or any other court concerning a child subject to this proceeding, other than that stated in item 3?

Yes No If yes, please provide the following information:

- A. Name of each child: _____
 B. Nature of proceeding: Dissolution of Marriage Guardianship
 Adoption Other (Specify) _____
 C. Court of Proceedings: (Specify Name, State, Location) _____

 D. Status of proceeding: _____

5. Do you know of any person who is not a party to this proceeding who has physical custody, or claims to have custody of, or visitation rights with any child subject to this proceeding?

Yes No If yes, please provide the following information:

Name and Address of Person	Name and Address of Person	Name and Address of Person
<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights	<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights	<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights
Name of each child	Name of each child	Name of each child

I declare under penalty of perjury under the laws of the State of Illinois that the foregoing is true and correct.

 (Type or print name)

 (Signature of Declarant)

Date _____